

**BEFORE THE
MEDICAL BOARD OF CALIFORNIA
DEPARTMENT OF CONSUMER AFFAIRS
STATE OF CALIFORNIA**

**In the Matter of the First Amended
Accusation Against:**

MONIQUE B. WILLIAMS, M.D.

Case No. 09-2005-170373

**Physician's and Surgeon's
Certificate No. A54185**

Respondent.

DECISION AND ORDER

The attached Stipulated Surrender of License and Order is hereby adopted as the Decision and Order of the Medical Board of California, Department of Consumer Affairs, State of California as its Decision in the above entitled matter.

This Decision shall become effective at 5:00 p.m. on February 2, 2011.

IT IS SO ORDERED January 26, 2011.

MEDICAL BOARD OF CALIFORNIA

By: 

**Linda K. Whitney
Executive Director**

1 EDMUND G. BROWN JR.
Attorney General of California
2 THOMAS S. LAZAR
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9 **BEFORE THE**
MEDICAL BOARD OF CALIFORNIA
10 **DEPARTMENT OF CONSUMER AFFAIRS**
11 **STATE OF CALIFORNIA**

12 In the Matter of the First Amended Accusation
Against:

Case No. 09-2005-170373

13 **MONIQUE B. WILLIAMS, M.D.**
14 385 East Mariposa Street
15 Altadena, CA 91001

**STIPULATED SURRENDER OF
LICENSE AND ORDER**

16 **Physician's and Surgeon's Certificate**
17 **No. A54185**

18 Respondent.

19
20 IT IS HEREBY STIPULATED AND AGREED by and between the parties in this
21 proceeding that the following matters are true:

22 **PARTIES**

23 1. Linda K. Whitney (Complainant) is the Interim Executive Director of the Medical
24 Board of California, and is represented in this matter by Edmund G. Brown Jr., Attorney General
25 of the State of California, by Samuel K. Hammond, Deputy Attorney General.

26 2. Monique B. Williams, M.D. (Respondent), is represented in this proceeding by
27 attorney Mark M. Hathaway, Esq., Law Offices of Mark J. Werksman, 888 West Sixth Street,
28 Fourth Floor, Los Angeles, CA 90017.

3. On or about May 3, 1995, the Medical Board of California issued Physician's and Surgeon's Certificate No. A54185 to Respondent Monique B. Williams, M.D. The license was in full force and effect at all times relevant to the charges brought in First Amended Accusation No. 09-2005-170373, expired on August 31, 2008 and has not been renewed. On or about April 22, 2008, Complainant sought and obtained an *ex parte* interim suspension order of Respondent's Physician's and Surgeon's Certificate No. A54185, pursuant to Government Code section 11529, subdivisions (b) and (c). By stipulation of the parties and Order issued thereon, Respondent's Physician's and Surgeon's Certificate No. A 54185 was suspended on or about May 12, 2008. As a result, Respondent remains suspended from the practice of medicine as of the date of the execution of this Stipulation for Surrender of License and Order.

JURISDICTION

4. On or about May 23, 2008, Accusation No. 09-2005-170373 was filed against Respondent before the Medical Board of California, Department of Consumer Affairs (Board). A true and correct copy of the Accusation and all other statutorily required documents were properly served on Respondent on May 23, 2008, and Respondent timely filed his Notice of Defense contesting the Accusation. On or about September 23, 2009, the Board filed First Amended Accusation No. 09-2005-170373 against Respondent. The First Amended Accusation, which superseded the original Accusation, is currently pending against Respondent. A true and correct copy of First Amended Accusation No. 09-2005-170373 is attached hereto as Exhibit A and incorporated herein by reference as if fully set forth herein.

ADVISEMENT AND WAIVERS

5. Respondent has carefully read, discussed with counsel, and fully understands the charges and allegations in First Amended Accusation No. 09-2005-170373. Respondent also has carefully read, fully discussed with counsel, and fully understands the effects of this Stipulated Surrender of License and Order.

6. Respondent is fully aware of her legal rights in this matter, including the right to a hearing on the charges and allegations in the First Amended Accusation; the right to confront and cross-examine the witnesses against her; the right to present evidence and to testify on her own

1 behalf; the right to the issuance of subpoenas to compel the attendance of witnesses and the
2 production of documents; the right to reconsideration and court review of an adverse decision;
3 and all other rights accorded by the California Administrative Procedure Act and other applicable
4 laws.

5 7. Respondent voluntarily, knowingly, and intelligently waives and gives up each and
6 every right set forth above.

7 CULPABILITY

8 8. Respondent admits the complete and accurate truth of each and every charge and
9 allegation in First Amended Accusation No. 09-2005-170373, and agrees that she has thereby
10 subjected her Physician's and Surgeon's Certificate No. A54185 to disciplinary action.
11 Respondent hereby surrenders her Physician's and Surgeon's Certificate No. A54185 for the
12 Board's formal acceptance.

13 9. Respondent understands that by signing this stipulation, she enables the Board to
14 issue an order accepting the surrender of her Physician's and Surgeon's Certificate No. A54185
15 without further process.

16 CONTINGENCY

17 10. The parties agree that this Stipulated Surrender and Order shall be submitted to the
18 Board for its consideration in the above-entitled matter and, further, that the Board shall have a
19 reasonable period of time in which to consider and act on this Stipulated Surrender of License and
20 Order after receiving it.

21 11. The parties agree that this Stipulated Surrender of License and Order shall be null
22 and void and not binding upon the parties unless approved and adopted by the Board, except for
23 this paragraph, which shall remain in full force and effect. Respondent fully understands and
24 agrees that in deciding whether or not to approve and adopt this Stipulated Surrender of License
25 and Order, the Board may receive oral and written communications from its staff and/or the
26 Attorney General's office. Communications pursuant to this paragraph shall not disqualify the
27 Board, any member thereof, and/or any other person from future participation in this or any other
28 matter affecting or involving Respondent. In the event that the Board, in its discretion, does not

1 approve and adopt this Stipulated Surrender of License and Order, with the exception of this
2 paragraph, it shall not become effective, shall be of no evidentiary value whatsoever, and shall
3 not be relied upon or introduced in any disciplinary action by either party hereto. Respondent
4 further agrees that should the Board reject this Stipulated Surrender of License and Order for any
5 reason, respondent will assert no claim that the Board, or any member thereof, was prejudiced by
6 its/his/her review, discussion and/or consideration of this Stipulated Surrender of License and
7 Order or of any matter or matters related hereto.

8 ADDITIONAL PROVISIONS

9 12. The parties understand and agree that facsimile copies of this Stipulated Surrender of
10 License and Order, including facsimile signatures thereto, shall have the same force and effect as
11 the originals.

12 13. This Stipulated Surrender of License and Order is intended by the parties herein to an
13 integrated writing representing the complete, final and exclusive embodiment of the agreements
14 of the parties in the above-entitled matter.

15 14. In consideration of the foregoing admissions and stipulations, the parties agree that
16 the Board may, without further notice or formal proceeding, issue and enter the following order:

17 ORDER

18 IT IS HEREBY ORDERED that Physician's and Surgeon's Certificate No. A54185, issued
19 to Respondent Monique B. Williams, M.D., is surrendered and accepted by the Medical Board of
20 California.

21 1. The surrender of Respondent's Physician's and Surgeon's Certificate No. A54185 and
22 the acceptance of the surrendered license by the Board shall constitute the imposition of
23 discipline against Respondent. This stipulation constitutes a record of the discipline and shall
24 become a part of Respondent's license history with the Board.

25 2. Respondent shall lose all rights and privileges as a physician and surgeon in
26 California as of the effective date of the Board's Decision and Order.

27 3. Respondent shall cause to be delivered to the Board both her wall license certificate
28 and, if one was issued, pocket license on or before the effective date of the Decision and Order.

4. If Respondent ever applies for licensure or petitions for reinstatement of license in the State of California, the Board shall treat it as a new application for licensure. Respondent must comply with all the laws, regulations and procedures for licensure in effect at the time the application or petition is filed, and all of the charges and allegations contained in First Amended Accusation No. 09-2005-170373 shall be deemed to be true, correct and fully admitted by Respondent when the Board determines whether to grant or deny the application or petition.

5. Should Respondent ever apply or reapply for a new license or certification, or petition for reinstatement of a license, by any other health care licensing agency in the State of California, all of the charges and allegations contained in First Amended Accusation No. 09-2005-170373, shall be deemed to be true, correct, and fully admitted by Respondent for the purpose of any Statement of Issues or any other proceeding seeking to deny or restrict licensure.

ACCEPTANCE

I have carefully read the above Stipulated Surrender of License and Order and have fully discussed it with my attorney, Mark M. Hathaway, Esq. I understand the stipulation and the effect it will have on my Physician's and Surgeon's Certificate No. A54185. I enter into this Stipulated Surrender of License and Order voluntarily, knowingly, and intelligently, and agree to be bound by the Decision and Order of the Medical Board of California.

DATED: June 15, 2010 Monique B. Williams M.D.
MONIQUE B. WILLIAMS, M.D.
Respondent

I have read and fully discussed with Respondent Monique B. Williams, M.D., the terms and conditions and other matters contained in this Stipulated Surrender of License and Order. I approve its form and content.

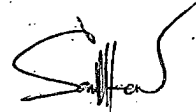
DATED: June 23, 2010 MARK M. HATHAWAY, ESQ.
Attorney for Respondent

ENDORSEMENT

The foregoing Stipulated Surrender of License and Order is hereby respectfully submitted
for consideration by the Medical Board of California of the Department of Consumer Affairs.

Dated: April 19, 2010

EDMUND G. BROWN JR.
Attorney General of California
THOMAS S. LAZAR
Supervising Deputy Attorney General



SAMUEL K. HAMMOND
Deputy Attorney General
Attorneys for Complainant

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Exhibit A

Accusation No. 09-2005-170373

EDMUND G. BROWN JR., Attorney General
of the State of California
STEVEN V. ADLER

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FILED
STATE OF CALIFORNIA
MEDICAL BOARD OF CALIFORNIA
SACRAMENTO *September 23, 20 09*
BY: J. K. HARRIS ANALYST

Attorneys for Complainant

**BEFORE THE
MEDICAL BOARD OF CALIFORNIA
DEPARTMENT OF CONSUMER AFFAIRS
STATE OF CALIFORNIA**

In the Matter of the First Amended Accusation
Against:

Case No. 09-2005-170373

MONIQUE B. WILLIAMS, M.D.
385 East Mariposa Street
Altadena, CA 91001

**FIRST AMENDED
ACCUSATION**

Physician's and Surgeon's Certificate
No. A 54185

Respondent.

Complainant alleges:

PARTIES

1. Barbara Johnston (Complainant) brings this First Amended Accusation solely in her official capacity as the Executive Director of the Medical Board of California, Department of Consumer Affairs.

2. On or about May 3, 1995, the Medical Board of California issued Physician's and Surgeon's Certificate Number A 54185 to Monique B. Williams, M.D. (Respondent). The Physician's and Surgeon's Certificate was in full force and effect at all times relevant to the charges brought herein and expired on August 31, 2008. On or about April 22, 2008, complainant sought and obtained an ex parte interim suspension of respondent's Physician's and Surgeon's Certificate

1 Number A54185 pursuant to Government Code section 11529, subdivisions (b) and (c). By
2 stipulation of the parties and order thereon issued on or about May 12, 2008, respondent's
3 Physician's and Surgeon's Certificate Number A54185 remains suspended pending a final decision
4 and order on this Accusation.

5 **JURISDICTION**

6 3. This First Amended Accusation, which superceded the original Accusation
7 filed in the above-entitled matter, is brought before the Medical Board of California (Board),
8 Department of Consumer Affairs, under the authority of the following laws. All section references
9 are to the Business and Professions Code unless otherwise indicated.

10 4. Section 2227 of the Code provides that a licensee who is found guilty under
11 the Medical Practice Act may have his or her license revoked, suspended for a period not to exceed
12 one year, placed on probation and required to pay the costs of probation monitoring, or such other
13 action taken in relation to discipline as the Division deems proper.

14 5. California Business and Professions Code section 725 provides:

15 “(a) Repeated acts of clearly excessive prescribing, furnishing, dispensing
16 or administering of drugs or treatment, repeated acts of clearly excessive use of
17 diagnostic procedures; or repeated acts of clearly excessive use of diagnostic or
18 treatment facilities as determined by the standard of the community of licensees is
19 unprofessional conduct for a physician and surgeon, dentist, podiatrist, psychologist,
20 physical therapist, chiropractor, optometrist, speech-language pathologist, or
21 audiologist.

22 “(b) Any person who engages in repeated acts of clearly excessive
23 prescribing or administering of drugs or treatment is guilty of a misdemeanor and
24 shall be punished by a fine of not less than one hundred dollars (\$100) nor more than
25 six hundred dollars (\$600), or by imprisonment for a term of not less than 60 days
26 nor more than 180 days, or by both that fine and imprisonment.

27 “....”

28 ///

1 6. California Business and Professions Code section 2234 provides:

2 “The Division of Medical Quality¹ shall take action against any licensee who
3 is charged with unprofessional conduct. In addition to other provisions of this article,
4 unprofessional conduct includes, but is not limited to, the following:

5 “(a) Violating or attempting to violate, directly or indirectly, assisting in
6 or abetting the violation of, or conspiring to violate any provision of this chapter.

7 “(b) Gross negligence.

8 “(c) Repeated negligent acts. To be repeated, there must be two or more
9 negligent acts or omissions. An initial negligent act or omission followed by a
10 separate and distinct departure from the applicable standard of care shall constitute
11 repeated negligent acts.

12 “(1) An initial negligent diagnosis followed by an act or omission
13 medically appropriate for that negligent diagnosis of the patient shall constitute a
14 single negligent act.

15 “(2) When the standard of care requires a change in the diagnosis, act, or
16 omission that constitutes the negligent act described in paragraph (1), including, but
17 not limited to, a reevaluation of the diagnosis or a change in treatment, and the
18 licensee’s conduct departs from the applicable standard of care, each departure
19 constitutes a separate and distinct breach of the standard of care.

20 “(d) Incompetence.

21 “(e) The commission of any act involving dishonesty or corruption which
22 is substantially related to the qualifications, functions, or duties of a physician and
23 surgeon.

24 ///

25 ///

26 _____
27 1. California Business and Professions Code section 2002, as amended and effective January 1, 2008, provides
28 that, unless otherwise expressly provided, the term “board” as used in the State Medical Practice Act (Cal. Bus. & Prof.
Code, §§ 2000, et seq.) means that the “Medical Board of California,” and references to the “Division of Medical
Quality” and “Division of Licensing” in the Act or any other provision of law deemed to refer to the Board.

1 “(f) Any action or conduct which would have warranted the denial of a
2 certificate.

3 “....”

4 7. Section 2236 states in pertinent part:

5 “(a) The conviction of any offense substantially related to the qualifications,
6 functions, or duties of a physician and surgeon constitutes unprofessional conduct
7 within the meaning of this chapter. The record of conviction shall be conclusive
8 evidence only of the fact that the conviction occurred.

9 “....”

10 8. California Business and Professions Code section 2238 provides:

11 “A violation of any federal statute or federal regulation or any of the statutes
12 or regulations of this state regulating dangerous drugs or controlled substances
13 constitutes unprofessional conduct.”

14 9. California Business and Professions Code section 2239 provides:

15 “(a) The use or prescribing for or administering to himself or herself, of
16 any controlled substance; or the use of any of the dangerous drugs specified in
17 Section 4022, or of alcoholic beverages, to the extent, or in such a manner as to be
18 dangerous or injurious to the licensee, or to any other person or to the public, or to
19 the extent that such use impairs the ability of the licensee to practice medicine safely
20 or more than one misdemeanor or any felony involving the use, consumption, or
21 self-administration of any of the substances referred to in this section, or any
22 combination thereof, constitutes unprofessional conduct. The record of the
23 conviction is conclusive evidence of such unprofessional conduct.”

24 “....”

25 ///

26 ///

27 ///

28 ///

10. California Business and Professions Code section 2242 provides:

“(a) Prescribing, dispensing, or furnishing dangerous drugs as defined in Section 4022 without an appropriate prior examination and a medical indication, constitutes unprofessional conduct.

“....”

11. Section 2266 of the Code states:

“The failure of a physician and surgeon to maintain adequate and accurate records relating to the provision of services to their patients constitutes unprofessional conduct.”

12. Unprofessional conduct under California Business and Professions Code section 2234 is conduct which breaches the rules or ethical code of the medical profession, or conduct which is unbecoming to a member in good standing of the medical profession, and which demonstrates an unfitness to practice medicine.²

FIRST CAUSE FOR DISCIPLINE

(Prescribing Dangerous Drugs Without an Appropriate Prior Examination and Medical Indication)

13. Respondent is subject to disciplinary action under sections 2227 and 2234, as defined by section 2242 of the Code, in that respondent prescribed dangerous drugs and controlled substances without an appropriate prior examination, as more particularly alleged hereinafter:

(a) Respondent distributed and diverted dangerous drugs and controlled substances by writing prescriptions without conducting an appropriate prior examination or without medical indication. The dangerous drugs and controlled substances included, but were not limited to, Vicodin³, OxyContin⁴ and Xanax⁵.

2. (*Shea v. Board of Medical Examiners* (1978) 81 Cal.App.3d 564, 575.)

3. Vicodin is a brand name for hydrocodone, a Schedule III controlled substance, which is listed as a drug of concern by the DEA. Hydrocodone diversion and abuse have been escalating in recent years. Hydrocodone is a generic name for a narcotic analgesic classified under federal law as a Schedule III controlled substance. Hydrocodone, when legally prescribed for a legitimate medical purpose, is typically used for the relief of mild to moderate pain and can be habit forming. A prescription is generally for a modest number of pills to be taken over a short period of time. Hydrocodone is also known by its brand names *Vicodin*®, *Norco*® and *Lortab*®, and is a commonly abused controlled

1 Additionally, through a search warrant executed at her residence on March 25, 2008,
2 law enforcement personnel discovered cocaine, in crack and powder form, related
3 drug paraphernalia, and other evidence to support respondent's illegal diversion of
4 dangerous drugs and controlled substances as set forth more fully below.

5 (b) On or about October 18, 2005, the Medical Board received an
6 anonymous complaint making numerous allegations against respondent. These
7 allegations included a recent arrest for assault and battery, making threats leading to
8 the issuance of a restraining order, alcohol abuse, possible bipolar disorder,
9 prescription and illicit drug use and abuse, excessive prescribing of hydrocodone,
10 NORCO, Vicodin and other pain medications, possible aiding and abetting the
11 unlicensed practice of medicine; and being terminated from her position at Kaiser
12 Permanente.

13 (c) On or about November 1, 2005, the Medical Board became aware of
14 an open investigation by the Drug Enforcement Administration's Office of Diversion
15 Control (hereinafter collectively referred to as "DEA") against respondent. The DEA
16 had opened their investigation against respondent based on a report from the Irvine
17 Police Department that respondent was potentially involved in writing prescriptions
18 for pain medications without performing any medical examination and without any
19 medically indicated need for the pain medication. The Irvine Police had arrested six
20 individuals who were in possession of prescription pain medications or prescription
21

22 substance that is diverted from legitimate medical channels. Hydrocodone is often diverted through, among other
23 things, doctor shopping, altered or fraudulent prescriptions, bogus call-in prescriptions, diversion by unscrupulous
24 physicians and pharmacists, and drug theft.

25 4. OxyContin, a prescription painkiller, is a Schedule II controlled substance which is identified as a drug of
26 concern by the DEA based on a marked escalation of its abuse as reported by drug abuse treatment centers, law
27 enforcement personnel, and health care professionals.

28 5. Xanax is a Schedule IV controlled substance used to treat anxiety disorders and panic attacks. Xanax is in
a class of medications called benzodiazepines. Abuse of benzodiazepines is particularly high among heroin and
cocaine abusers. A large percentage of people entering treatment for narcotic or cocaine addiction also report abusing
benzodiazepines. One method of the illegal distribution of both OxyContin and Xanax is through improper prescribing
by physicians.

1 forms for pain medication written by respondent. One of those arrested reported that
2 respondent would provide prescriptions for Vicodin or hydrocodone without
3 conducting any medical examination or without any apparent medical indication.

4 (d) A review of a Controlled Substances Utilization Review and
5 Evaluation System (CURES) report, setting forth the prescriptions written by
6 respondent over the period of January 1, 2005 to October 28, 2005, raised concerns
7 over respondent's prescribing practices. The CURES report had a number of unusual
8 and suspicious entries. Nearly all the prescriptions were for Vicodin which is the
9 registered trade name for hydrocodone, identified as a drug of concern by the DEA.
10 Several patients were receiving large quantities of the drug and were filling the
11 prescriptions at different pharmacies which is often done by drug addicts trying to
12 hide a drug addiction.

13 (e) On or about December 9, 2005, a Medical Board investigator spoke
14 with the confidential informant ("CI-1") who filed the initial complaint with the
15 Medical Board. CI-1 established his familiarity with respondent and indicated he had
16 information which might be useful to the Medical Board's investigation. CI-1
17 requested confidentiality because he believed respondent was volatile and potentially
18 violent. Among other things, CI-1 informed the Medical Board investigator of his
19 belief that respondent was bi-polar and self-medicated by taking prescription drugs
20 like Vicodin, as well as street drugs like cocaine and crystal methamphetamine; and
21 that respondent wrote prescriptions of Vicodin for patients, friends and family, and
22 then asked them to give her some of the Vicodin prescribed to them.

23 (f) On or about January 13, 2006, a Medical Board investigator spoke
24 with another witness who asked to remain anonymous. This witness, designated as
25 CI-2, informed the Medical Board investigator that, among other things, she had
26 observed erratic behavior from respondent such as the time when respondent called
27 CI-2 and her friend at regular intervals all night long. On one occasion, CI-2 heard
28 respondent order 1000 tablets of Viagra over the phone. When CI-2 questioned

1 respondent about this transaction, respondent became defensive. Respondent
2 eventually told CI-2 that she was going to sell the Viagra to a drug dealer.
3 Respondent met the dealer in front of her apartment complex and exchanged the
4 Viagra for cocaine. CI-2 informed the Medical Board investigator that she had
5 observed respondent "get high" about four times: twice at a friend's house and twice
6 in a public restroom. Respondent's drug of choice was identified as cocaine. CI-2
7 reported also seeing respondent take Vicodin. Respondent once offered to sell CI-2
8 some Vicodin but CI-2 declined.

9 **THE UNDERCOVER BUY OF APRIL 5, 2006**

10 (g) During the course of the DEA investigation, a confidential source
11 ("CS") agreed to cooperate with the DEA by participating in an undercover buy
12 from respondent set for April 5, 2006. The undercover buy took place at
13 respondent's office. During the undercover buy, respondent saw CS in her office,
14 not in an examination room. Respondent never asked CS how he was feeling and
15 never asked any questions about his health. CS reminded respondent he was there
16 to pick up a prescription for himself and one for "Mr. Charlie." CS dictated his
17 name, the drugs he desired, and the desired quantity, while respondent filled out a
18 triplicate prescription form. He then did the same for "Mr. Charlie's"
19 prescription. CS paid respondent in cash and left with the prescriptions. There
20 was no medical examination nor any medical indication for writing these prescriptions.

21 **THE UNDERCOVER BUY OF SEPTEMBER 25, 2007**

22 (h) The DEA used another confidential source, identified as CS-2, to
23 make additional undercover buys from respondent. CS-2 had recently been arrested
24 on drug charges and offered to provide evidence against several Los Angeles area
25 doctors, including respondent, who were selling prescriptions and/or drugs.

26 (i) On or about September 25, 2007, the DEA carried out an undercover
27 buy between CS-2 and respondent. As part of the buy, CS-2 met respondent in the
28 parking garage of her residence in Los Angeles. CS-2 provided respondent with

1 three undercover drivers licenses in the names of M [REDACTED] N [REDACTED], R [REDACTED] G [REDACTED]
2 and M [REDACTED] S [REDACTED]. Respondent gave out the following prescriptions for a cost of
3 \$400 each: M [REDACTED] N [REDACTED] (100 OxyContin, 80 mg and 60 Valium, 10 mg); R [REDACTED]
4 G [REDACTED] (100 OxyContin, 80 mg and 60 Xanax, 2 mg); and M [REDACTED] S [REDACTED] (100
5 OxyContin, 80 mg and 60 Xanax, 2 mg.) Prior to writing these prescriptions,
6 respondent did not conduct any medical examination nor was there any medical
7 indication for prescribing the OxyContin and Xanax to any of the aforementioned
8 individuals. In addition to the aforementioned transactions, respondent informed CS-
9 2 that she had 200 OxyContin pills and she would consider selling some or all of
10 them for \$25.00 a piece. CS-2 told respondent that he would think about it.

11 **THE UNDERCOVER BUY OF OCTOBER 16, 2007**

12 (j) On or about October 16, 2007, at approximately 4:15 p.m., another
13 undercover buy took place between respondent and CS-2. CS-2 met respondent in
14 the parking garage of her residence in Los Angeles. CS-2 provided respondent
15 with undercover drivers licenses to obtain six prescriptions for four hundred
16 dollars (\$400) a piece for a combined total of two thousand four hundred dollars
17 (\$2,400). The following prescriptions were written by respondent under the
18 names on the drivers licenses provided by CS-2: S [REDACTED] H [REDACTED] (100 OxyContin,
19 80 mg and 60 Xanax, 2 mg); C [REDACTED] C [REDACTED] (100 OxyContin, 80 mg and 60
20 Xanax, 2 mg); D [REDACTED] Y [REDACTED] (100 OxyContin, 80 mg and 60 Xanax, 2 mg); F [REDACTED]
21 P [REDACTED] (100 OxyContin, 80 mg and 60 Xanax, 2 mg); R [REDACTED] G [REDACTED] (100
22 OxyContin, 80 mg and 60 Xanax, 2 mg) and C [REDACTED] P [REDACTED] (100 OxyContin, 80
23 mg and 60 Xanax, 2 mg). Prior to writing these prescriptions, respondent did not
24 conduct any medical examination nor was there any medical indication for
25 prescribing the OxyContin and Xanax to any of the aforementioned individuals.

26 (k) During the undercover buy of October 16, 2007, respondent and
27 CS-2 had a conversation about where to get prescriptions for OxyContin filled and
28 she suggested a pharmacy in the valley called "Vine" where the pharmacist,

1 Roseanne, would be willing to fill 10 prescriptions for 60 pills per week. Respondent
2 said this amount would be "under the radar."

3 (l) Additional CURES reports for the time frame covering
4 December 1, 2006 to April 13, 2007 and April 1, 2007 to July 31, 2007 were
5 reviewed and revealed suspicious activity. The CURES reports for prescriptions
6 written by respondent showed numerous prescriptions for OxyContin written in
7 combination with Vicodin. Several of these prescriptions were filled at Vine
8 Discount Pharmacy. The prescribing pattern was suspicious based on, among
9 other things, the large volume of OxyContin and Vicodin being prescribed by
10 respondent and the number of prescriptions being filled at the Vine Pharmacy.

11 **THE UNDERCOVER BUY OF NOVEMBER 8, 2007**

12 (m) On November 8, 2007, another undercover buy took place between
13 CS-2 and respondent. CS-2 received a telephone call from respondent in which
14 CS-2 and respondent discussed the purchase of three prescriptions for 100
15 OxyContin, 80 mg tablets. CS-2 called respondent and gave her the names of
16 three individuals in whose names the prescriptions were to be written and told
17 respondent that he would bring her photocopies of the three driver licenses.
18 Respondent told CS-2 to meet her in the parking structure of her apartment
19 building. CS-2 met respondent as instructed and gave her the copies of the three
20 driver's licenses and \$1,200 in exchange for three prescriptions of 100
21 OxyContin, 80 mg tablets. CS-2 provided respondent with photocopies of three
22 undercover driver's licenses used by DEA Special Agents and Diversion
23 Investigators in the names of M [REDACTED] N [REDACTED] (DOB [REDACTED]), R [REDACTED] G [REDACTED]
24 (DOB [REDACTED]) and M [REDACTED] S [REDACTED] (DOB [REDACTED]). Respondent gave CS-2
25 prescriptions for each of the aforementioned for 100 OxyContin, 80 mg. Prior to
26 writing these prescriptions, respondent did not conduct any medical examinations,
27 asked no questions concerning symptoms or illness of the three individuals and
28 there was no medical indication to support the prescriptions.

1 **THE UNDERCOVER BUY OF DECEMBER 22, 2007**

2 (n) Between December 19, 2007, and December 21, 2007, CS-2 recorded
3 several conversations between CS-2 and respondent. In a recorded conversation
4 between CS-2 and respondent on December 19, 2007, respondent offered to sell CS-2
5 two hundred (200) OxyContin, 80 mg tablets at \$25.00 each. CS-2 asked respondent
6 to lower the price and respondent told CS-2 that the reason the price per pill was so
7 high was because of the "overhead" and that doctors and pharmacists have to be paid
8 as well as the people who allow their names and drivers licenses to be used to obtain
9 the prescription. On the recording, respondent informed CS-2 that she would give
10 CS-2 a free prescription to make up for the high cost of each OxyContin tablet.
11 Respondent also told CS-2 that she is happy that she found some OxyContin tablets
12 for him. On December 20, 2007, CS-2 provided respondent with the name of
13 M [REDACTED] N [REDACTED] (DOB [REDACTED]) in which the free prescription should be written. CS-2
14 and respondent agreed to meet in the parking structure of her apartment building on
15 December 21, 2007. During the buy, CS-2 gave respondent \$5,000 for 200
16 OxyContin, 80 mg tablets. At that time, respondent also gave CS-2 the "free"
17 prescription for 100 OxyContin, 80 mg tablets and 60 Xanax, 2 mg tablets in the
18 name that CS-2 had provided to respondent. Prior to writing the prescription,
19 respondent did not conduct any medical examination, asked no questions concerning
20 symptoms or illness of the individual in whose name the prescription was written and
21 there was no medical indication to support the prescription.

22 **THE SEARCH OF RESPONDENT'S RESIDENCE**

23 (o) On or about March 25, 2008, a search warrant was executed on
24 respondent's residence by the DEA. Respondent's apartment was filled with
25 clothing, shoes, plastic storage bins, papers, dirty dishes, and other clutter.

26 (p) During the search of respondent's residence, the following items
27 were discovered:

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1 (1) Cocaine in crack and powder form and drug related
2 paraphernalia which is discussed in more detail in paragraph 16(c), below;

3 (2) Numerous handwritten lists of patients' names, dates of
4 birth, drug names, and quantities, and dates;

5 (3) Hundreds of prescription receipts in respondent's
6 handwriting for controlled substances and dangerous drugs, mostly OxyContin
7 and oxycodone, often in combination with Vicodin, Soma or other similar
8 controlled substances and dangerous drugs;

9 (4) Patient charts were found in a small red suitcase on
10 respondent's balcony, loose charts in the master bedroom, and loose charts in the
11 master bedroom closet. Many charts contained few, if any, records of any
12 examination or treatment. The charts almost always contained copies of
13 prescriptions and/or faxed refill requests from or to pharmacies; and

14 (5) Handwritten cards, letters and notes written to respondent
15 from people who appeared to be her patients. Many of these cards and notes
16 enclosed a payment (some cards still contained cash) and requested a refill or a
17 new prescription for a specified medication.

18 **SECOND CAUSE FOR DISCIPLINE**

19 **(Gross Negligence)**

20 14. Respondent is further subject to disciplinary action under sections 2227 and
21 2234, as defined by section 2234, subdivision (b), of the Code, in that she has committed gross
22 negligence as more particularly alleged hereinafter:

23 (a) Paragraph 13, above, is hereby incorporated by reference as if fully
24 set forth herein.

25 (b) Respondent committed gross negligence which included, but was
26 not limited to, the following:

27 (1) Failing to obtain a history and failing to perform an appropriate prior
28 examination prior to providing prescriptions for dangerous drugs and controlled

1 substances; and failing to obtain a history and failing to perform an appropriate prior
2 examination prior to distributing dangerous drugs and controlled substances.

3 (2) Failing to have a treatment plan with specific objectives prior to
4 providing prescriptions for dangerous drugs and controlled substances; and failing
5 to have a treatment plan with specific objectives prior to distributing dangerous drugs
6 and controlled substances.

7 (3) Failing to discuss the potential risks and benefits as part of any
8 informed consent prior to providing prescriptions for dangerous drugs and controlled
9 substances; and failing to discuss the potential risks and benefits as part of any
10 informed consent prior to distributing dangerous drugs and controlled substances.

11 (4) Failing to maintain accurate or adequate records related to providing
12 prescriptions for dangerous drugs and controlled substances; and failing to maintain
13 accurate or adequate records related to the distribution of dangerous drugs and
14 controlled substances.

15 (5) Providing prescriptions for dangerous drugs and controlled substances
16 without any medical indication; and distributing dangerous drugs and controlled
17 substances without any medical indication.

18 **THIRD CAUSE FOR DISCIPLINE**

19 **(Repeated Negligent Acts)**

20 15. Respondent is further subject to disciplinary action under sections 2227 and
21 2234, as defined by section 2234, subdivision (c), of the Code, in that she committed repeated
22 negligent acts, as more particularly alleged hereinafter:

23 (a) Paragraphs 13 through 14, above, are hereby incorporated by reference
24 as if fully set forth herein.

25 **FOURTH CAUSE FOR DISCIPLINE**

26 **(Acts of Dishonesty or Corruption)**

27 16. Respondent is further subject to disciplinary action under sections 2227 and
28 2234, as defined by section 2234, subdivision (e), of the Code, in that she committed acts of

1 dishonesty or corruption by illegally providing prescriptions for dangerous drugs and controlled
2 substances; and by illegally diverting dangerous drug and controlled substances, as more particularly
3 alleged hereinafter:

4 (a) Paragraphs 13 through 15, above, are hereby incorporated by reference
5 as if fully set forth herein.

6 **FIFTH CAUSE FOR DISCIPLINE**

7 **(Excessive Use of Alcohol or Drugs)**

8 17. Respondent is further subject to disciplinary action under sections 2227 and
9 2234 as defined by section 2239, in that she has used, prescribed, and/or administered dangerous
10 drugs and controlled substances to herself to the extent, or in such a manner as to be dangerous or
11 injurious to herself, or to any other person or to the public, or to the extent that such use, impairs her
12 ability to practice medicine safely, as more particularly alleged hereinafter:

13 (a) Paragraphs 13 through 16, above, are hereby incorporated by reference
14 as if fully set forth herein.

15 (b) On or about March 25, 2008, a search warrant was executed on
16 respondent's residence by the DEA. Respondent's apartment was filled with
17 clothing, shoes, plastic storage bins, papers, dirty dishes, and other clutter.
18 Respondent was frisked and she felt very thin and emaciated. She had a drowsy look
19 about her.

20 (c) During the search of respondent's residence, evidence of recent crack
21 cocaine use was discovered in respondent's master bathroom including, but not
22 limited to, a blackened crack pipe, a blackened metal spoon, a butane lighter, cotton
23 pads, baking soda (often used as a cutting agent), and copper scrubber pads (often
24 used as a filter) on the bathroom counter. Two small plastic baggies were discovered
25 in a makeup bag in the master bathroom. One baggie contained a small amount of
26 white powder. The other baggie contained a larger amount of a hard white chalky
27 substance which field tested positive for cocaine. The white powder and white
28 ///

1 chalky substances seized from respondent's master bathroom field tested positive for
2 cocaine.

3 (d) The search of respondent's residence took many hours. During the
4 search of her residence, respondent remained in her daughter's room sleeping except
5 for when she got up to use the restroom and get a bowl of soup.

6 (e) During the hearing of April 22, 2008 on the Petition for Interim Order
7 of Suspension in this case, respondent admitted that she was a recovering cocaine
8 addict.

9 **SIXTH CAUSE FOR DISCIPLINE**

10 **(Violation of Federal and State Drug Laws)**

11 18. Respondent is further subject to disciplinary action under sections 2227 and
12 2234, as defined by section 2238 of the Code, in that respondent has violated state and federal drug
13 laws, to wit, Health and Safety Code sections 11054, 11153, 11154, 11157, 11350 and 11352 and
14 similar federal laws and regulations in the Federal Controlled Substances Act, 21 U.S.C. §§ 800 et
15 seq., in regards to her use and possession of illegal drugs and her unlawful distribution and sale of
16 dangerous drugs and controlled substances, as more particularly alleged hereinafter:

17 (a) Paragraphs 13 through 17, above, are hereby incorporated by reference
18 as if fully set forth herein.

19 **SEVENTH CAUSE FOR DISCIPLINE**

20 **(Failure to Maintain Accurate and Adequate Medical Records)**

21 19. Respondent is further subject to disciplinary action under sections 2227 and
22 2234, as defined by section 2266, in that respondent failed to maintain accurate and adequate
23 medical records, as more particularly alleged hereinafter:

24 (a) Paragraphs 13 through 18, above, are hereby incorporated by reference
25 as if fully set forth herein.

26 (b) Respondent failed to maintain accurate or adequate medical records
27 in that she failed to, among other things, document a history, physical examination,
28 treatment plan with specific objectives, informed consent and/or other medical

1 indication in regards to prescriptions for dangerous drugs and controlled substances;
2 and the distribution of dangerous drugs and controlled substances.

3 **EIGHTH CAUSE FOR DISCIPLINE**

4 **(Repeated Acts of Excessive Prescribing, Furnishing, Dispensing or Administering Drugs)**

5 20. Respondent is further subject to disciplinary action under sections 2227 and
6 2234, as defined by section 725, in that respondent committed repeated acts of clearly excessive
7 prescribing, furnishing, dispensing or administering drugs, as more particularly alleged herein.

8 (a) Paragraphs 13 through 19, above, are hereby incorporated by reference
9 as if fully set forth herein.

10 (b) Respondent committed repeated acts of excessively prescribing,
11 furnishing, dispensing or administering dangerous drugs and controlled substances
12 through her actions of, among other things, selling prescriptions for, and distributing,
13 dangerous drugs and controlled substances without an appropriate prior examination
14 or any medical indication on multiple occasions as evidenced by, but not limited to,
15 the prescribing pattern established through CURES reports, undercover operations
16 by the DEA, and through materials observed and obtained as part of the search
17 warrant executed on March 25, 2008.

18 **NINTH CAUSE FOR DISCIPLINE**

19 **(Conviction of a Crime Substantially Related to the Qualifications,
20 Functions or Duties of a Physician and Surgeon)**

21 21. Respondent is further subject to disciplinary action under Code sections 2227 and
22 2234 as defined by section 2236 of the Code, in that she has been convicted of a crime substantially
23 related to the qualifications, functions, or duties of a physician and surgeon, as more particularly
24 alleged below:

25 A. On or about November 10, 2008, in the United States District Court, Central District
26 of California, in the case of the *United States of America v. Monique Williams*, Case No. CR-
27 08-01171-MMM, respondent pled guilty to violation of Title 21, U.S.C. sections 841(a)(1)
28 and (b)(1)(C) [knowing, intentional and illegal distribution of a controlled substance].

1 B. On or about August 3, 2009, as a result of the guilty plea, respondent was sentenced
2 to 36 months imprisonment at the Bureau of Prisons. Upon release from prison, respondent
3 shall be placed on supervised release for a term of three (3) years under specified terms and
4 conditions including but not limited to the following:

5 1. Respondent shall comply with the rules and regulations of the United
6 States Probation Office and General Order 318;

7 2. Respondent shall refrain from any unlawful use of controlled
8 substance and shall submit to drug tests as directed by the Probation Officer;

9 3. Respondent shall participate in outpatient substance abuse treatment
10 and drug counseling, shall abstain from use of illicit drugs and alcohol and shall
11 refrain from abusing prescription medication;

12 4. Respondent shall not be employed in any capacity wherein she has
13 custody, control or management of drugs or prescription drugs; and

14 5. Respondent shall not be employed in any position that requires
15 licensing and/or certification by any local, state or federal agency without approval
16 of the Probation Officer.

17 C. The facts and circumstances surrounding this conviction and to which
18 respondent stipulated in her federal plea agreement are as follows: On or about the
19 dates listed below, respondent knowingly and intentionally issued the prescriptions
20 and/or dispensed the drugs described below. Respondent issued these prescriptions
21 and/or dispensed the drugs without conducting any medical examinations on the
22 individuals to whom the drugs were prescribed and/or dispensed. There was no
23 legitimate medical purpose for respondent to issue the prescriptions and/or dispense
24 the drugs and their issuance occurred outside the course of professional medical
25 practice. Respondent intentionally prescribed and/or sold these drugs outside of the
26 usual course of professional medical practice for personal financial gain, as more
27 particularly alleged herein.

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1 a. September 25, 2007

2 On or about September 25, 2007, respondent met a confidential DEA source (CS) in
3 the parking garage of respondent's residence and wrote prescriptions in exchange for money.
4 CS provided respondent with photocopies of driver's licenses of M.N., R.G., and M.S., and
5 requested that respondent write prescriptions in these individuals' names. In exchange for
6 \$400 per prescription, respondent provided CS with the following prescriptions:

- 7 (1) M.N. for 100 OxyContin, 80 mg and 60 Valium, 10 mg
8 (2) R.G. for 100 OxyContin, 80 mg and 60 Xanax, 2 mg
9 (3) M.S. for 100 OxyContin, 80 mg and 60 Xanax, 2 mg

10 Respondent also offered to sell CS 200 OxyContin pills for \$25 per pill.

11 b. October 16, 2007

12 On or about October 16, 2007, respondent met CS in the parking garage of
13 respondent's apartment complex. Respondent agreed to sell CS six (6) prescriptions for
14 \$400 each. CS provided respondent with the names of five driver's licenses and \$2,400.
15 Respondent then provided CS with the following prescriptions:

- 16 (1) S.H. for 100 OxyContin, 80 mg and 60 Xanax, 2 mg
17 (2) C.C. for 100 OxyContin, 80 mg and 60 Xanax, 2 mg
18 (3) D.Y. for 100 OxyContin, 80 mg and 60 Xanax, 2 mg
19 (4) F.P. for 100 OxyContin, 80 mg and 60 Xanax, 2 mg
20 (5) R.G. for 100 OxyContin, 80 mg and 60 Xanax, 2 mg During the buy,

21 respondent suggested to CS that the prescriptions be filled at a specialty pharmacy where the
22 pharmacist would be willing to fill 10 prescriptions for 60 pills a week. Respondent
23 suggested that this amount would stay "under the radar."

24 c. November 8, 2007

25 On or about November 8, 2007, respondent called CS and discussed selling CS three
26 prescriptions for 100 OxyContin, 80 mg tablets. CS gave respondent three names from
27 driver's licenses in whose names the prescriptions were to be written and told respondent that
28 he would bring her copies of the licenses when he picked up the prescriptions. CS later met

1 respondent in the parking garage at her residence. CS gave respondent \$1,200 and
2 respondent provided CS with the following prescriptions:

3 (1) M.N. for 100 OxyContin, 80 mg

4 (2) R.G. for 100 OxyContin, 80 mg

5 (3) M.S. for 100 OxyContin, 80 mg

6 d. December 21, 2007

7 On or about December 19, 2008, respondent spoke to CS by telephone and offered
8 to sell CS 200 OxyContin 80 mg tablets for \$25 each. CS asked respondent to lower the
9 price, but respondent said that she could not do so because her overhead was high.
10 Respondent told CS that because of the high price per pill, she would give CS a free
11 prescription. On December 21, 2007, CS spoke with respondent via telephone and provided
12 respondent with the undercover name and date of birth of a DEA Special Agent in which the
13 free prescription should be written. On December 21, 2007, respondent met with CS in the
14 parking garage of her residence. CS gave respondent \$5,000 and respondent provided CS
15 with 200 OxyContin 80 mg. tablets. Respondent also provided CS with the free prescription
16 written for M.N. for 100 OxyContin, 80 mg and 60 Xanax 2 mg.

17 **TENTH CAUSE FOR DISCIPLINE**

18 **(Unprofessional Conduct)**

19 22. Respondent is further subject to disciplinary action under sections 2227 and
20 2234 of the Code in that she has engaged in conduct which breaches the rules or ethical code of the
21 medical profession, or conduct which is unbecoming to a member in good standing of the medical
22 profession, and which demonstrates an unfitness to practice medicine, as more particularly described
23 hereinafter:

24 (a) Paragraphs 13 through 21, above, are hereby incorporated by reference
25 as if fully set forth herein.

26 **PRAYER**

27 WHEREFORE, Complainant requests that a hearing be held on the matters herein
28 alleged, and that following the hearing, the Medical Board of California issue a decision:

